

PTO/SB/17 (01-06)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL**For FY 2006**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 1,000.00**Complete if Known**

Application Number	10/747,956
Filing Date	December 31, 2003
First Named Inventor	Ulrich SESEKE-KOYRO
Examiner Name	NGUYEN, NGOC YEN M
Art Unit	1754
Attorney Docket No.	037110.51540D1

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):
- ☒ Deposit Account Deposit Account Number: **05-1323 (Docket No. 102623.51540D1)** Deposit Account Name: **23911**
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments
- under 37 CFR 1.16 and 1.17

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims -20 or HP **Extra claims** x **Fees (\$)** = **Fee Paid (\$)**

Multiple Dependence Claims

Fee (\$) **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20

Indep. Claims - 3 or HP **Extra claims** x **Fees (\$)** = **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = **Extra Sheets** / 50 = **Number of each additional 50 or fraction thereof** x **Fee (\$)** = **Fee Paid (\$)**

Round up to a whole number

4. OTHER FEES

Non-English Specification, \$130 fee (no small entity discount)

Other: Request for Oral Hearing

Fee Paid (\$)

\$1,000.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 26,269	Telephone (202) 624-2500
Name (Print/Type)	J.D. Evans	Date	August 1, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 10/747,956 Confirmation No. : 6209
First Named Inventor : Ulrich SESEKE-KOYRO
Filed : December 31, 2003
TC/A.U. : 1754
Examiner : NGUYEN, NGOC YEN M
Docket No. : 037110.51540D1
Customer No. : 23911
Title : Alkali Metal Fluoro Zincate and The Production
Thereof

REQUEST FOR ORAL HEARING

Mail Stop Appeal Brief- Patents
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Appellants hereby request an oral hearing in connection with the appeal of the above-identified application.

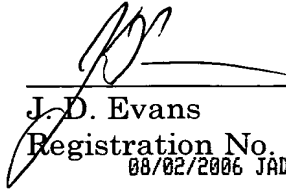
Appellants hereby submit the required hearing fee of \$1,000.00 under 37 CFR 1.17 (g).

It would be appreciated if the undersigned were telephoned in the event there are any questions related to this response or the application in general.

If necessary to effect a timely response, this paper should be considered as a petition for an Extension of Time sufficient to effect a timely response, and please charge any such fee or any deficiency in fees or credit any overpayment of fees to Deposit Account No. 05-1323, Docket No. 037110.51540D1.

Respectfully submitted,

August 1, 2006



J.D. Evans

Registration No. 26,269

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